MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

OUS SERIAL NO.

OUS SERIAL NO.

APPLICANT(S)

FILING DATE

							CLAIMS	<u> </u>						<u> </u>
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				* 440.45			Ĺ	CLAIMS		MANUEL SERVICE	L	THE PARTY		AALD.

MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

Barbara Campbell Medional Stage Processing (703) 305-3631

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